

HOUSE BILL 2388

By Eckles

AN ACT to amend Tennessee Code Annotated, Title 68, Chapter 1, Part 10, relative to cancer reporting.

BE IT ENACTED BY THE GENERAL ASSEMBLY OF THE STATE OF TENNESSEE:

SECTION 1. The General Assembly finds:

(a) The Tennessee Cancer Reporting System Act was adopted by the General Assembly in 1983 and amended in 1985. Under this statute, the department of health maintains a central data bank containing information on persons in Tennessee who have been diagnosed with cancer.

(b) In 1992, Congress adopted Public Law 102-515, the Cancer Registries Amendment Act, by which a National Program of Cancer Registries was created. Under this federal program, the Centers for Disease Control and Prevention makes grants to states to support their operation of cancer registries such as the one Tennessee maintains.

(c) Public Law 102-515 requires the states to meet certain federal standards in order to remain eligible for grants under the National Program of Cancer Registries. The goal of Public Law 102-515 is to standardize the reporting of cancer cases throughout the United States.

(d) The Tennessee Cancer Reporting System Act needs to be revised in certain respects in order that Tennessee may continue to qualify for federal grants to maintain its cancer registry.

SECTION 2. Tennessee Code Annotated, Section 68-1-1002(1), is amended by deleting the word "and" in subitem (C), adding the word "and" at the end of subitem (D), and adding the following words as a new subitem (E):

(E) In-situ cancer.

SECTION 3. Tennessee Code Annotated, Section 68-1-1002(6), is amended by deleting the comma after the word "made," placing a semi colon after the word "made," and deleting the remaining words in that item.

SECTION 4. Tennessee Code Annotated, Section 68-1-1002(8), is amended by deleting the words "Precancerous disease" and substituting in their place the words "In-situ cancer," and is further amended by replacing the semi colon with a period and deleting the word "and" at the end of that item.

SECTION 5. Tennessee Code Annotated, Section 68-1-1002, is amended by deleting item (9) in its entirety.

SECTION 6. Tennessee Code Annotated, Section 68-1-1002, is amended by adding definitions of the following terms, appropriately numbered:

( ) "Facility" means a health care facility in which diagnosis or treatment services are provided to patients with cancer, including, but not limited to, an ambulatory surgical treatment center, a freestanding cancer treatment center, a radiation therapy center, a chemotherapy treatment center, a nursing home, an oncology or dermatology clinic, a laboratory, or any other facility which provides screening, detection, diagnostic or therapeutic services to patients with cancer.

( ) "Health care practitioner" means a physician, surgeon, or other health care professional licensed under Title 63 who is engaged in diagnosing and treating patients who have cancer.

SECTION 7. Tennessee Code Annotated, Section 68-1-1003, is amended by deleting that section in its entirety and substituting the following language in its place:

(a) The purpose of this act is to ensure an accurate and continuing source of data concerning cancer and to provide appropriate data to members of the medical, scientific, and academic research communities for purposes of authorized institutional research, approved by the appropriate research committee of the applying institution, into the causes, types and demography of such diseases, including, but not limited to, the occupation, family history, and personal habits of persons diagnosed with cancer.

(b) In order to accomplish the purpose described in (a), all hospitals, laboratories, facilities, and health care practitioners shall report to the department, within six (6) months after the date of diagnosis of cancer in a patient, information contained in the medical records of patients who have cancer; provided, however, health care practitioners are not required to report information on patients with cancer who are directly referred to or have been previously admitted to a hospital or a facility for cancer diagnosis or treatment.

(c) The reports required by this section shall be made in such format and shall contain such information as is required by the department. The department shall make available the necessary information regarding format and data to enable hospitals, laboratories, facilities, and health care practitioners to make accurate reports to the department.

(d) The commissioner or the commissioner's authorized representative may take such steps as are necessary to avoid duplicate reporting of information on the same patients, including, but not limited to, waiving the requirement for a health care

practitioner to report information on cancer patients who are hospitalized or confined to a nursing home, where information on those patients has been reported by the hospital, nursing home, or other reporting source.

(e) The commissioner or the commissioner's authorized representative shall be permitted to have access to the medical records of cancer patients which are maintained by hospitals, laboratories, facilities, and health care practitioners where necessary to identify cases of cancer and to establish the characteristics of the cancer, the treatment of the cancer, or the medical status of an identified cancer patient.

(f) If a hospital, laboratory, facility, or health care practitioner fails to report the required information to the department in an acceptable format by the required deadline, the commissioner or the commissioner's authorized representative may obtain the information by a direct examination of those patients' medical records. In such cases, the hospital, laboratory, facility, or health care practitioner shall reimburse the department for the department's reasonable expenses incurred in obtaining the information in this manner. The commissioner shall establish in rules the maximum amount of reimbursement which may be sought, and a hospital, laboratory, facility, or health care practitioner from whom reimbursement is sought may appeal the assessment of expenses under the Tennessee Uniform Administrative Procedures Act.

(g) A hospital, laboratory, facility, or health care practitioner that fails to report information or allow access to records, as required by this section, shall be informed by the department that compliance with the requirements of this act is mandatory. Where a hospital, laboratory, facility, or health care practitioner has been informed by the department that compliance is mandatory and then willfully refuses to comply with the requirements of this act, the commissioner may impose a civil penalty not to exceed one hundred dollars (\$100) for each day that access to records is denied. The imposition of

a civil penalty shall be subject to all provisions of the Tennessee Uniform Administrative Procedures Act, including the right of judicial review.

SECTION 8. Tennessee Code Annotated, Section 68-1-1004(a), is amended by deleting the words "and other specified precancerous and tumorous diseases."

SECTION 9. Tennessee Code Annotated, Section 68-1-1005(a), is amended by deleting the words "at least nine (9) but no more than," by deleting the words and punctuation ", but not limited to," and, by deleting the language after the word "following:" and by substituting instead the following:

- (1) One biostatistician;
- (2) One cancer registrar;
- (3) One epidemiologist;
- (4) One medical oncologist;
- (5) One surgical oncologist;
- (6) One radiation oncologist;
- (7) One pathologist;
- (8) One hospital representative;
- (9) One laboratory representative;
- (10) One health information professional;
- (11) The commissioner or the commissioner's designee; and
- (12) One additional member appointed by the commissioner.

SECTION 10. Tennessee Code Annotated, Section 68-1-1007, is amended by deleting the language of that section in its entirety and substituting in its place the following language:

A hospital, laboratory, facility, or health care practitioner that reports information to the department or allows the commissioner or the commissioner's authorized representative access to the medical records of cancer patients, as required by this act, shall not be held liable to any person for the release of such information to the

department, nor shall the release of such information to the department be construed as a violation of any requirement of law or professional obligation to maintain the confidentiality of patient information.

SECTION 11. Tennessee Code Annotated, Title 68, Chapter 1, Part 10, is amended by adding the following language as a new section:

(a) In order to obtain complete information on Tennessee cancer patients who have been diagnosed or treated in other states and in order to provide information to other states regarding their residents who have been diagnosed or treated for cancer in Tennessee, the commissioner or the commissioner's authorized representative is hereby authorized to enter into appropriate written agreements with other states that maintain statewide cancer registries, allowing the exchange of information on cancer patients.

(b) Each state with which the commissioner agrees to exchange such information must agree in writing to keep all patient-specific information confidential and to require any research personnel to whom the information is made available to keep it confidential.

SECTION 12. Tennessee Code Annotated, Title 68, Chapter 1, Part 10, is amended by adding the following language as a new section:

The department shall annually compile and publish reports utilizing the data collected pursuant to this act and shall make these reports available to the governor, the general assembly, and the public.

SECTION 13. This act shall take effect upon becoming a law, the public welfare requiring it.